

☐ PRELIMINARY
☐ FINAL

DRILLING REQUEST

OFFICE OF DRILLING SERVICES

Date _____

Instructions: Please complete this form and submit to Jan Rutenbergs (916) 227-5863 **Fax #** (916) 227-4408

Geologist / Engineer _____ Telephone No. _____		Senior Geologist / Engineer Signature _____ Telephone No. _____			
PROJECT INFORMATION		District	County	Route	Post Mile / KP
Geographic Name / Bridge Name _____					
EA No. _____	FA - Activity Code _____	Special Des _____	Is this project on the ES Delivery Plan? <input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Construction Support <input type="checkbox"/> Maintenance Support		
			Requested Start Date _____		

DRILLING AND SAMPLING NEEDS

WireLine (94mm) <input type="checkbox"/> Hx Core (2.4") <input type="checkbox"/> Nx Core (1.875") <input type="checkbox"/> Hx Punch Core <input type="checkbox"/> Brass <input type="checkbox"/> Lexan <input type="checkbox"/> Nx Punch Core <input type="checkbox"/> Brass <input type="checkbox"/> Lexan	Auger <input type="checkbox"/> 5.625" Hollow Stem <input type="checkbox"/> 6.5" Hollow Stem <input type="checkbox"/> 8" Hollow Stem <input type="checkbox"/> 5.5" Solid Flight	Conventional Open Hole <input type="checkbox"/> Nw Core (2.06") <input type="checkbox"/> Bw Core (1.615") <input type="checkbox"/> Tricone/Drag Diam.: _____ <input type="checkbox"/> Other: _____	Drive / Push Samples <input type="checkbox"/> SPT <input type="checkbox"/> Shelby Tube <input type="checkbox"/> California Modified <input type="checkbox"/> Brass <input type="checkbox"/> Lexan	Drilling Phase: _____ Est. # Borings: _____ Est. Max.Depth: _____
<input type="checkbox"/> Hydraulic Drive Rig <input type="checkbox"/> 1" Soil Tube (Wacker) <input type="checkbox"/> Other _____				

Expected Rock / Soil Type(s): _____

SITE CONSTRAINTS

Limited / Difficult Access: ☐ Yes ☐ No (summarize in remarks) _____

Permit-to-Enter: ☐ Yes ☐ No (please attach) _____

Environmental Permits: ☐ Yes ☐ No (please attach) _____

☐ F & G ☐ Army Corp ☐ USFWS ☐ Other(s) _____

Remarks _____

TRAFFIC CONTROL ☐ Yes ☐ No

☐ Lane ☐ Shoulder ☐ On/Off Ramp ☐ Bridge Deck

Maximum Permissible Closure Window(s) per District Maintenance / Traffic Management (days and times)

LOCAL MAINTENANCE YARD

Name: _____

Contact Person: _____

Phone No: _____ Cell No: _____

Slope Inclinomter Casing

Est. # SI Borings: _____

☐ 3.34" Geo-Loc est. qty(ft): _____

☐ 2.75" Geo-Loc est. qty(ft): _____

TDR Cable

☐ 18 gauge est. qty(ft): _____

☐ 0.5" est. qty(ft): _____

SI Casing Backfill

☐ Cement-Bentonite Grout

☐ No. 8 Sand

INSTALLATIONS

Est. # Piezo Borings: _____

Slotted (.020) PVC Sch 80

☐ 4" est. qty(ft): _____

☐ 1.5" est. qty(ft): _____

☐ 1" est. qty(ft): _____

Solid PVC Sch 80

☐ 6" est. qty(ft): _____

☐ 4" est. qty(ft): _____

☐ 1.5" est. qty(ft): _____

☐ 1" est. qty(ft): _____

Piezo Backfill

☐ No. 8 Sand

☐ Other

☐ Not Required

Monuments (qty)

☐ 5" Flush Mount _____

☐ 4" Flush Mount _____

☐ 2" Flush Mount _____

☐ 4.5" Locking _____

☐ 5.5" Locking _____

☐ 6" Locking _____

BOREHOLE ABANDONMENT

☐ In-Situ Material Backfill

☐ Bentonite Chip Backfill

☐ Cement-Bentonite Grout

☐ Temporary Open Hole

Est. Closure Date for Open BoreHole(s):

**THE FINAL, SIGNED DRILL REQUEST IS DUE BY CLOSE OF BUSINESS
TUESDAY OF THE WEEK PRIOR TO THE SCHEDULED DRILLING
START-UP DATE.**